SEC 1972 Potential persons who are to respond to the collection of information contained in this form are (6-02) not required to respond unless the form displays a currently valid OMB control number.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549



FORM D

OMB APPROVAL
OMB Number: 3235-0076
Expires: May 31, 2005
Estimated average burden hours per response... 1

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY				
Prefix		Serial		
DAT	E RECEI	VED		

Name of Offering ([] check if t Sale of Series A Preferred Sto	his is an amendment and name has changed ck	, and indicate change.)
Filing Under (Check box(es) that apply):	[] <u>Rule 504</u> [] <u>Rule 505</u> [X] <u>Rule 506</u> [] Section 4(6) [] ULOE
Type of Filing: [] New Filing	[X] Amendment	PROCESSED MAY 2 6 2004
	A. BASIC IDENTIFICATION DATA	THOMSON FINANCIAL
Enter the information requester	d about the issuer	
Name of Issuer ([] check if this is Bitfone Corporation	s an amendment and name has changed, and inc	licate change.)
Address of Executive Offices (Nu	umber and Street, City, State, Zip Code) To	elephone Number (Including Area Code)
32451 Golden Lantern, Ste. 30	01. Laguna Niguel. CA 92677	(949) 234-7000

Address of Principal Business Operations (Number and Street, City, State, Zip Code) I elephone Number (Including Area Code) (if different from Executive Offices)						
Brief Description of Business Communication Software Deve	elopment					
Type of Business Organization [X] corporation [] business trust	[] limited partnership, already formed					
Actual or Estimated Date of In Organization: Jurisdiction of Incorporation or State:	Month Year corporation or [0][6][0][0] [X] Actual [] Corganization: (Enter two-letter U.S. Postal Service abbreviation for CN for Canada; FN for other foreign jurisdiction) [D][E]					

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

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- 2. Enter the information requested for the following:

 - Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that [] Promoter Apply:	[X] Beneficial Owner	[X] Executive Officer	[X] Director	[] General and/or Managing Partner			
Full Name (Last name first, if indiv Wang, Gene	ridual)						
Business or Residence Address (No. 10 C/O Bitfone Corporation, 32451 Go							
Check Box(es) that [] Promoter Apply:	[] Beneficial Owner	[X] Executive Officer	[] Director	[] General and/or Managing Partner			
Full Name (Last name first, if indiv Xu, Hang	ridual)						
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Bitfone Corporation, 32451 Golden Lantern, Ste. 301, Laguna Niguel, CA 92677							
Check Box(es) that [] Promoter Apply:	[] Beneficial Owner	[] Executive Officer	[X] Director	[] General and/or Managing Partner			
Full Name (Last name first, if indiv Malloy, John	ridual)						
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Nokia Venture Partners, 545 Middlefield Road, Suite 210, Menlo Park, CA 94025							
Check Box(es) that [] Promoter Apply:	[] Beneficial Owner	[] Executive Officer	[X] Director	[] General and/or Managing Partner			
Full Name (Last name first, if indiv Aslin, David	ridual)						
Business or Residence Address († c/o 3i Technology Partners, L.P., 2		•	•				

Check Box(es) that [] Promoter Apply:	[]	Beneficial Owner	[]	Executive Officer	[X] Director	[]	General and/or Managing Partner
Full Name (Last name first, if individually Wendell, Michell	dual)							
Business or Residence Address (No c/o Nexit Ventures, 12930 Saratoga				•		•		
Check Box(es) that [] Promoter Apply:	[]	Beneficial Owner	[]	Executive Officer	[X] Director	[General and/or Managing Partner
Full Name (Last name first, if individ Randall, Roderick	dual)							
Business or Residence Address (No C/o St. Paul Venture Capital, 10400						,		
Check Box(es) that [] Promoter Apply:	[]	Beneficial Owner	[]	Executive Officer	[X] Director	[]	General and/or Managing Partner
Full Name (Last name first, if individe Baum, David	dual)		·····					
Business or Residence Address (N c/o Prism Venture Partners, 100 Lo				-		•	090	
Check Box(es) that [] Promoter Apply:	[X]	Beneficial Owner	[]	Executive Officer	[] Director	[General and/or Managing Partner
Full Name (Last name first, if individually Lilley, Patrick	dual)							
Business or Residence Address (N c/o Bitfone Corporation, 32451 Gold								
Check Box(es) that [] Promoter Apply:	[X]	Beneficial Owner	[]	Executive Officer	[] Director	[General and/or Managing Partner
Full Name (Last name first, if individ IREALMS, Inc.	dual)		,					
Business or Residence Address (N c/o Patrick Lilley, 32451 Golden La								

Check Box(es) that [] Promoter Apply:	[X] Beneficial Owner	[]	Executive Officer	[]	Director	[]	General and/or Managing Partner
Full Name (Last name first, if indiv Peyton, P. Carlton	idual)				erite en		
Business or Residence Address (No. 2016) C/o Bitfone Corporation, 32451 Go			•		•		
Check Box(es) that [] Promoter Apply:	[X] Beneficial Owner	[]	Executive Officer	[]	Director	[]	General and/or Managing Partner
Full Name (Last name first, if indiv Nokia Venture Partners II, L.P.	idual)						
Business or Residence Address (I 545 Middlefield Road, Ste. 210, M			y, State, Zip	Code)		
Check Box(es) that [] Promoter Apply:	[X] Beneficial Owner	[]	Executive Officer	[]	Director	[]	General and/or Managing Partner
Full Name (Last name first, if indiv St. Paul Venture Capital VI, LLC	ridual)	***************************************					
Business or Residence Address (I 10400 Viking Drive, Ste. 550, Ede			y, State, Zip	Code)		
Check Box(es) that [] Promoter Apply:	[X] Beneficial Owner	[]	Executive Officer	[]	Director	[]	General and/or Managing Partner
Full Name (Last name first, if indiv 3i Technology Partners, L.P.	ridual)	HATEN (E 17 Management oc					
Business or Residence Address (I 275 Middlefield Road, Menlo Park		et, Cit	y, State, Zip	Code)		
Check Box(es) that [] Promoter Apply:	[X] Beneficial Owner	[]	Executive Officer	[]	Director	[]	General and/or Managing Partner
Full Name (Last name first, if indiv Motorola, Inc.	ridual)						
Business or Residence Address (I 1303 East Algonquin Road, Schau				Code)		

Check Box(es) that [] Promoter [X] Beneficial [] Executive [] Director [] Apply: Owner Officer	General and/or Managing Partner					
Full Name (Last name first, if individual) Prism Venture Partners IV, L.P.						
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Prism Venture Partners, 100 Lowder Brook Drive, Suite 2500, Westwood, MA 02090						
Check Box(es) that [] Promoter [X] Beneficial [] Executive [] Director [] Apply: Owner Officer	General and/or Managing Partner					
Full Name (Last name first, if individual) Wang Family Living Trust						
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Bitfone Corporation, 32451 Golden Lantern, Ste. 301, Laguna Niguel, CA 92677						
(Use blank sheet, or copy and use additional copies of this sheet, as n	ecessary.)					
B. INFORMATION ABOUT OFFERING						
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.	Yes No					
2. What is the minimum investment that will be accepted from any individual?	\$ 0.96					
3. Does the offering permit joint ownership of a single unit?	Yes No					
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.						
Full Name (Last name first, if individual)						
Business or Residence Address (Number and Street, City, State, Zip Code)						
Name of Associated Broker or Dealer						

States	in Wh	ich Per	son List	ed Has	Solicite	d or Int	ends to	Solicit F	Purchase	ers		
(Check	c"All S	tates" or	check i	ndividua	al States)					[] All Sta	tes
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[XT]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full N	ame (L	ast nan	ne first,	if indivi	dual)		***************************************					
Busine	ess or l	Resider	nce Add	lress (N	lumber	and Str	eet, City	, State,	Zip Cod	e)		n terre a nombre de Prima pala programa por esta en esta como esta de la como de la como de la como de la como
Name	of Ass	ociated	Broker	or Dea	iler							
								Solicit F	Purchase	ers		
(Check	c"All S	tates" or	check i	ndividu	al States))				[] All Sta	ites
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[MM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[XT]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full N	ame (L	ast nan	ne first,	if indivi	dual)							
Busine	ess or l	Resider	nce Add	lress (N	lumber	and Str	eet, City	, State,	Zip Cod	e)		
Name of Associated Broker or Dealer												
States	in Wh	ich Per	son List	ted Has	Solicite	ed or Int	ends to	Solicit F	Purchase	ers		
					al States)					[] All Sta	ites
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
***************************************	(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)											

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box " and indicate in the columns below the amounts of the

securities offered for exchange and already exchanged.

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Type of Security Debt	Aggregate Offering Price \$0	Amount Already Sold \$0
Equity	. \$ <u>21,500,000</u>	\$ 20,500,000.00
[] Common [X] Preferred		
Convertible Securities (including warrants)		\$0
Partnership Interests	\$0	\$0
Other	\$	\$0
(Specify). Total	\$ 21,500,000	\$ 20,500,000.00
Answer also in Appendix, Column 3, if filing under ULOE.	\$ <u>21,500,000</u>	\$ <u>20,500,000.00</u>
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors Non-accredited Investors Total (for filings under Rule 504 only)	0	\$ <u>20,500,000.00</u> \$ <u>0</u>
Answer also in Appendix, Column 4, if filing under ULOE.		
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		
Type of offering	Type of Security	Dollar Amount Sold
Rule 505		\$
Regulation A		
Rule 504		\$0
Total		\$
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
Transfer Agent's Fees Printing and Engraving Costs		

Legal Fees[] \$	110,000.00
Accounting Fees] \$	
Engineering Fees] \$	
Sales Commissions (specify finders' fees separately)[] \$	
Other Expenses (identify) <u>Securities Compliance</u> []\$	600.00
Total[] \$	110,600.00
b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."	<u> </u>	21,389,400.00

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C – Question 4.b above.

	Payments to Officers, Directors, & Affiliates	-
Salaries and fees	•	[]\$
Purchase of real estate	.[]\$	[]\$
Purchase, rental or leasing and installation of machinery and equipment	.[]\$	[]\$
Construction or leasing of plant buildings and facilities	. []\$	[]\$
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	[]\$	[]\$
Repayment of indebtedness		[]\$
Working capital	[]\$	[]\$ <u>21,389,400.00</u>
Other specify):	_[]\$	[]\$
	-[]\$	[]\$
Column Totals	[]\$0	[]\$21,389,400.00
Total Payments Listed (column totals added)		[]\$ <u>21,389,400.00</u>

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The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under <u>Rule 505</u>, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of <u>Rule 502</u>.

Issuer (Print or Type)	Signature /	Date
Bitfone Corporation	HUML	May <u>13</u> , 2004
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Hang Xu	Chief Financial Officer	

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations.

(See 18 U.S.C. 1001.)

E. STATE SIGNATURE

- 1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification Yes No provisions of such rule? [] [X]
 - See Appendix, Column 5, for state response.
- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature /	Date
Bitfone Corporation	Hall.	May <u>13</u> , 2004
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Hang Xu	Chief Financial Officer	

Instruction: Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	2								
	3		3		4	5			
	Intend to sell to non- accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)			Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No	Series C Preferred Stock	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA		X	\$7,047,396.00	9	\$7,047,396.00	0	0		X
СО									
СТ									
DE									
DC			A delication of the second of		444				
FL								······································	
GA									
HI									
IL		X	\$1,147,045.00	1	\$1,147,045.00	0	0		X
IN		Λ	\$1,147,043.00	<u> </u>	\$1,147,045.00	V	<u> </u>		A
IA									
KS									
KY									
LA									
ME									
MD		İ							
MA		X	\$10,011,470.00	2	\$10,011,470.00	0	0		X
MI									
MN		X	\$2,294,089.00	1	\$2,294,089.00	0	0		X
MS									
МО									
MT									

NE				
NV				
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http://www.sec.gov/divisions/corpfin/forms/formd.htm Last update: 06/06/2002